

| POSITION | INITIALS | ID NO. | DATE |
|---------------------|----------|--------|---------|
| FEE DETERMINATION | NW | 71534 | 6-10-99 |
| O.I.P.E. CLASSIFIER | | 48 | 6/14/99 |
| FORMALITY REVIEW | Y2 | 20647 | 6-18-99 |

INDEX OF CLAIMS

10-27-99

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral) Canceled A Appeal
 - Restricted O Objected

| Claim | Final | Original | Date |
|-------|-------|----------|----------|
| 1 | ✓ | ✓ | 10/22/98 |
| 2 | - | ✓ | 12/16/98 |
| 3 | ✓ | ✓ | 11/24/98 |
| 4 | ✓ | ✓ | 11/24/98 |
| 5 | ✓ | ✓ | 11/24/98 |
| 6 | ✓ | ✓ | 11/24/98 |
| 7 | ✓ | ✓ | 11/24/98 |
| 8 | ✓ | ✓ | 11/24/98 |
| 9 | ✓ | ✓ | 11/24/98 |
| 10 | ✓ | ✓ | 11/24/98 |
| 11 | ✓ | ✓ | 11/24/98 |
| 12 | ✓ | ✓ | 11/24/98 |
| 13 | ✓ | ✓ | 11/24/98 |
| 14 | ✓ | ✓ | 11/24/98 |
| 15 | ✓ | ✓ | 11/24/98 |
| 16 | ✓ | ✓ | 11/24/98 |
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| Claim | Final | Original | Date |
|-------|-------|----------|----------|
| 51 | ✓ | ✓ | 11/24/98 |
| 52 | - | ✓ | |
| 53 | - | ✓ | |
| 54 | - | ✓ | |
| 55 | - | ✓ | |
| 56 | ✓ | ✓ | |
| 57 | ✓ | ✓ | |
| 58 | - | ✓ | |
| 59 | - | ✓ | |
| 60 | - | ✓ | |
| 61 | - | ✓ | |
| 62 | - | ✓ | |
| 63 | - | ✓ | |
| 64 | ✓ | ✓ | |
| 65 | - | ✓ | |
| 66 | - | ✓ | |
| 67 | - | ✓ | |
| 68 | - | ✓ | |
| 69 | - | ✓ | |
| 70 | - | ✓ | |
| 71 | - | ✓ | |
| 72 | - | ✓ | |
| 73 | - | ✓ | |
| 74 | - | ✓ | |
| 75 | - | ✓ | |
| 76 | - | ✓ | |
| 77 | - | ✓ | |
| 78 | - | ✓ | |
| 79 | - | ✓ | |
| 80 | - | ✓ | |
| 81 | - | ✓ | |
| 82 | - | ✓ | |
| 83 | - | ✓ | |
| 84 | - | ✓ | |
| 85 | - | ✓ | |
| 86 | - | ✓ | |
| 87 | - | ✓ | |
| 88 | - | ✓ | |
| 89 | - | ✓ | |
| 90 | - | ✓ | |
| 91 | - | ✓ | |
| 92 | - | ✓ | |
| 93 | - | ✓ | |
| 94 | - | ✓ | |
| 95 | - | ✓ | |
| 96 | - | ✓ | |
| 97 | - | ✓ | |
| 98 | - | ✓ | |
| 99 | - | ✓ | |
| 100 | - | ✓ | |

| Claim | Final | Original | Date |
|-------|-------|----------|------|
| 110 | - | ✓ | |
| 112 | - | ✓ | |
| 113 | - | ✓ | |
| 114 | - | ✓ | |
| 115 | - | ✓ | |
| 116 | - | ✓ | |
| 117 | - | ✓ | |
| 118 | - | ✓ | |
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| 120 | - | ✓ | |
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| 142 | - | ✓ | |
| 143 | - | ✓ | |
| 144 | - | ✓ | |
| 145 | - | ✓ | |
| 146 | - | ✓ | |
| 147 | - | ✓ | |
| 148 | - | ✓ | |
| 149 | - | ✓ | |
| 150 | - | ✓ | |

If more than 150 claims or 10 actions
staple additional sheet here

(LEFT INSIDE)